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Return of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

2009

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2009, or tax year beginning

, and ending

G Check all that apply  Initial return  Initial return of a former public charity  Final return  
 Amended return  Address change  Name change

Use the IRS label Otherwise, print or type.  See Specific Instructions	Name of foundation <b>THE SHAW FAMILY ENDOWMENT FUND</b> <b>C/O SCOTT BARLEY</b>		A Employer identification number <b>26-0476590</b>		
	Number and street (or P O box number if mail is not delivered to street address) <b>120 WEST 45TH STREET, 39TH FLOOR</b>		B Telephone number <b>(212) 478-0726</b>		
C If exemption application is pending, check here ► <input type="checkbox"/> D 1 Foreign organizations, check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>					
E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>					
<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))</small>					
Revenue	1 Contributions, gifts, grants, etc., received	(a) Revenue and expenses per books <b>15,642.</b>	(b) Net investment income <b>58,178.</b>	(c) Adjusted net income <b>N/A</b>	
	2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	<b>990.</b>			
	6b Gross sales price for all assets sold	<b>990.</b>			
	7 Capital gain net income (from Part II, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less cost of goods sold					
c Gross profit or (loss)	<b>380.</b>	<b>0.</b>	<b>STATEMENT 2</b>		
11 Other income	<b>75,190.</b>	<b>59,168.</b>			
12 Total. Add lines 1 through 11					
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	<b>0.</b>	<b>0.</b>	<b>0.</b>	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees	<b>STMT 3</b>	<b>5,366.</b>	<b>0.</b>	<b>5,366.</b>
	b Accounting fees	<b>STMT 4</b>	<b>13,372.</b>	<b>6,686.</b>	<b>6,686.</b>
	c Other professional fees				
	17 Interest				
	18 Taxes	<b>STMT 5</b>	<b>3,743.</b>	<b>1,743.</b>	<b>0.</b>
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses	<b>STMT 6</b>	<b>1,140.</b>	<b>0.</b>	<b>1,140.</b>
	24 Total operating and administrative expenses Add lines 13 through 23		<b>23,621.</b>	<b>8,429.</b>	<b>13,192.</b>
25 Contributions, gifts, grants paid		<b>2,419,633.</b>		<b>2,419,633.</b>	
26 Total expenses and disbursements Add lines 24 and 25		<b>2,443,254.</b>	<b>8,429.</b>	<b>2,432,825.</b>	
27 Subtract line 26 from line 12		<b>-2,368,064.</b>			
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)		<b>50,739.</b>			
c Adjusted net income (if negative, enter -0-)			<b>N/A</b>		

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing		9,220,022.	6,839,796.	6,839,796.
	2 Savings and temporary cash investments				
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons				
	7 Other notes and loans receivable ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments - U.S. and state government obligations				
	b Investments - corporate stock				
	c Investments - corporate bonds				
	11 Investments - land, buildings, and equipment basis ►				
	Less accumulated depreciation ►				
	12 Investments - mortgage loans				
	13 Investments - other	STMT 7	1,901,725.	1,917,718.	1,490,415.
	14 Land, buildings, and equipment basis ►				
	Less accumulated depreciation ►				
	15 Other assets (describe ► )		3,831.	0.	0.
	16 Total assets (to be completed by all filers)		11,125,578.	8,757,514.	8,330,211.
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ► )				
	23 Total liabilities (add lines 17 through 22)		0.	0.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>				
	and complete lines 27 through 31				
	27 Capital stock, trust principal, or current funds		0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds		11,125,578.	8,757,514.	
	30 Total net assets or fund balances		11,125,578.	8,757,514.	
	31 Total liabilities and net assets/fund balances		11,125,578.	8,757,514.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	11,125,578.
2 Enter amount from Part I, line 27a	2	-2,368,064.
3 Other increases not included in line 2 (itemize) ►	3	0.
4 Add lines 1, 2, and 3	4	8,757,514.
5 Decreases not included in line 2 (itemize) ►	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	8,757,514.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1a CAPITAL GAINS DIVIDENDS</b>					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)	
a 990.					990.
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			
a					990.
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2		990.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8	{ }		3		N/A

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Yes  No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	920,436.	6,657,007.	.138266
2007	0.	27,858.	.000000
2006			
2005			
2004			

2 Total of line 1, column (d)	2	.138266
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.069133
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	9,424,881.
5 Multiply line 4 by line 3	5	651,570.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	507.
7 Add lines 5 and 6	7	652,077.
8 Enter qualifying distributions from Part XII, line 4	8	2,432,825.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate  
See the Part VI instructions

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**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1	1	507.
Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		
3 Add lines 1 and 2	2	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	3	507.
5 Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-	4	0.
6 Credits/Payments	5	507.
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	2,408.
b Exempt foreign organizations - tax withheld at source	6b	
c Tax paid with application for extension of time to file (Form 8868)	6c	
d Backup withholding erroneously withheld	6d	
7 Total credits and payments Add lines 6a through 6d	7	2,408.
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,901.
11 Enter the amount of line 10 to be Credited to 2010 estimated tax ►	11	0.

**Part VII-A Statements Regarding Activities**

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1a	X
c Did the foundation file Form 1120-POL for this year?	1b	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ <u>0.</u> (2) On foundation managers ► \$ <u>0.</u>	1c	X
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a tax return on Form 990-T for this year?	4a	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	4b	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	5	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	6	X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► <u>NY, DE</u>	7	X
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X

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**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	<input type="checkbox"/> 11	<input checked="" type="checkbox"/> X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <b>N/A</b>	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> X
14	The books are in care of ► <b>SCOTT BARLEY</b> Located at ► <b>120 WEST 45TH STREET, 39TH FLOOR, NEW YORK, NY</b>	Telephone no ► (212) 478-0726 ZIP+4 ► 10036	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	►   15	<b>N/A</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		<b>Yes</b>	<b>No</b>
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(6)	Agree to pay money or property to a government official? (Exception Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	<b>N/A</b>	►   1b
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		<b>1c</b>   <input checked="" type="checkbox"/> X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
	If "Yes," list the years ► _____, _____, _____, _____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions )	<b>N/A</b>	►   2b
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► _____, _____, _____, _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009 )	<b>N/A</b>	►   3b
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<input checked="" type="checkbox"/> X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	<b>4b</b>	<input checked="" type="checkbox"/> X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5a During the year did the foundation pay or incur any amount to

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No
- (3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?  Yes  No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

►

5b

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

Yes  No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes  No

6b

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes  No

N/A

7b

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DAVID E. SHAW C/O SCOTT BARLEY, 120 WEST 45TH STREET NEW YORK, NY 10036	TREASURER AND 2.00	SECRETARY 0.	0.	0.
BETH K. SHAW C/O SCOTT BARLEY, 120 WEST 45TH STREET NEW YORK, NY 10036	PRESIDENT 3.00		0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

►

0

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**Part VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

**Total number of others receiving over \$50,000 for professional services**



0

**Part IX-A | Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

Expenses

1	N/A	
2		
3		
4		

**Part IX-B | Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1	N/A	
2		
3		

All other program-related investments. See instructions

3		

**Total. Add lines 1 through 3**



0.

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	1,142,318.
b Average of monthly cash balances	1b	8,426,089.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	9,568,407.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	9,568,407.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	143,526.
5 Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	9,424,881.
6 Minimum investment return Enter 5% of line 5	6	471,244.

**Part XI Distributable Amount** (see instructions) (Section 4942(l)(3) and (l)(5) private operating foundations and certain foreign organizations check here ►  and do not complete this part.)

1 Minimum investment return from Part X, line 6	1	471,244.
2a Tax on investment income for 2009 from Part VI, line 5	2a	507.
b Income tax for 2009 (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	507.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	470,737.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	470,737.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	470,737.

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,432,825.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,432,825.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b	5	507.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,432,318.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				470,737.
2 Undistributed income, if any, as of the end of 2009			0.	
a Enter amount for 2008 only				
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008	589,736.			
f Total of lines 3a through e	589,736.			
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 2,432,825.			0.	
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				470,737.
e Remaining amount distributed out of corpus	1,962,088.			0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below	2,551,824.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		0.		
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see instr				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010			0.	
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	2,551,824.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008	589,736.			
e Excess from 2009	1,962,088.			

## THE SHAW FAMILY ENDOWMENT FUND

Form 990-PF (2009)

C/O SCOTT BARLEY

26-0476590

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**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ►

4942(j)(3) or  4942(j)(5)

2 a	Tax year (a) 2009	Prior 3 years			(e) Total
		(b) 2008	(c) 2007	(d) 2006	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)****1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**SEE STATEMENT 8**

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

THE SHAW FAMILY ENDOWMENT FUND  
C/O SCOTT BARLEY

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**Part XV** **Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SEE STATEMENT 9				
<b>Total</b>			► 3a	<b>2,419,633.</b>
<i>b Approved for future payment</i>				
NONE				
<b>Total</b>			► 3b	<b>0.</b>

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514	(e) Related or exempt function income
	(a) Business code	(b) Amount		
1 Program service revenue				
a				
b				
c				
d				
e				
f				
g Fees and contracts from government agencies				
2 Membership dues and assessments				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities			14	58,178.
5 Net rental income or (loss) from real estate				
a Debt-financed property				
b Not debt-financed property				
6 Net rental income or (loss) from personal property				
7 Other investment income				
8 Gain or (loss) from sales of assets other than inventory			18	990.
9 Net income or (loss) from special events				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue				
a <b>NONDIVIDEND DISTRIBUTION</b>				
b - COHEN & STEERS SELECT				
c UTIL FUND			01	380.
d				
e				
12 Subtotal Add columns (b), (d), and (e)		0.		59,548.
13 Total. Add line 12, columns (b), (d), and (e)			13	59,548.

## Part XVI-B Relationship of Activities

## **Relationship of Activities to the Accomplishment of Exempt Purposes**



**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

**2009****Name of the organization**THE SHAW FAMILY ENDOWMENT FUND  
C/O SCOTT BARLEY**Employer identification number**

26-0476590

**Organization type (check one):****Filers of:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization  
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation  
 4947(a)(1) nonexempt charitable trust treated as a private foundation  
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year. ► \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

THE SHAW FAMILY ENDOWMENT FUND  
C/O SCOTT BARLEY

Employer identification number

26-0476590

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DAVID E. SHAW C/O SCOTT BARLEY, 120 W. 45TH STREET, FL 39  NEW YORK, NY 10036	\$ 15,642.	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II if there is a noncash contribution)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II if there is a noncash contribution)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II if there is a noncash contribution)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II if there is a noncash contribution)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II if there is a noncash contribution)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II if there is a noncash contribution)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II if there is a noncash contribution)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II if there is a noncash contribution)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash  (Complete Part II if there is a noncash contribution)

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
VANGUARD	990.	990.	0.
VANGUARD	58,178.	0.	58,178.
TOTAL TO FM 990-PF, PART I, LN 4	59,168.	990.	58,178.

  

FORM 990-PF	OTHER INCOME	STATEMENT	2
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
NONDIVIDEND DISTRIBUTION - COHEN & STEERS SELECT UTIL FUND	380.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	380.	0.	

  

FORM 990-PF	LEGAL FEES	STATEMENT	3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	5,366.	0.		5,366.
TO FM 990-PF, PG 1, LN 16A	5,366.	0.		5,366.

  

FORM 990-PF	ACCOUNTING FEES	STATEMENT	4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	13,372.	6,686.		6,686.
TO FORM 990-PF, PG 1, LN 16B	13,372.	6,686.		6,686.

FORM 990-PF

TAXES

STATEMENT

5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID	1,743.	1,743.		0.
UNITED STATES TREASURY 2008 EXTENSION PAYMENT MADE IN 2009	2,000.	0.		0.
TO FORM 990-PF, PG 1, LN 18	3,743.	1,743.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT

6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
NYS DEPARTMENT OF LAW	750.	0.		750.
INCISIVE MEDIA	120.	0.		120.
CT CORPORATION	270.	0.		270.
TO FORM 990-PF, PG 1, LN 23	1,140.	0.		1,140.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT

7

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
VANGUARD - EMERGING MARKETS STOCK INDEX ADMIRAL FUND	COST	1,215,984.	971,752.
VANGUARD - INTERNATIONAL EXPLORER FUND	COST	311,484.	240,217.
COHEN & STEERS - SELECT UTILITY FUND	COST	275,600.	159,500.
ALLIANCE BERNSTEIN - GLOBAL HIGH INCOME FUND	COST	114,650.	118,946.
TOTAL TO FORM 990-PF, PART II, LINE 13		1,917,718.	1,490,415.

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FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT 8
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## NAME OF MANAGER

DAVID E. SHAW  
BETH K. SHAW

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FORM 990-PF	GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	STATEMENT 9
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RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AAAS 1200 NEW YORK AVENUE NW WASHINGTON, DC 20005	GENERAL	509(A)(2)	50,000.
AMERICAN ACADEMY OF ARTS AND SCIENCES 136 IRVING STREET CAMBRIDGE, MA 02138	ANNUAL FUND	509(A)(1)	15,000.
AMERICAN ACADEMY OF ARTS AND SCIENCES 136 IRVING STREET CAMBRIDGE, MA 02138	GENERAL	509(A)(1)	35,000.
AMERICAN FRIENDS OF TEL AVIV UNIVERSITY 39 BROADWAY, 15TH FLOOR NEW YORK, NY 10006	GENERAL	509(A)(1)	75,000.
AMERICAN MUSEUM OF NATURAL HISTORY 79TH ST & CENTRAL PARK W NEW YORK, NY 10024	GENERAL	509(A)(1)	25,000.
AMERICAN MUSEUM OF NATURAL HISTORY 79TH ST & CENTRAL PARK W NEW YORK, NY 10024	ANNUAL FAMILY PARTY	509(A)(1)	5,000.

AMERICAN OPERA PROJECTS, INC 138 SOUTH OXFORD STREET BROOKLYN, NY 11217	GENERAL	509(A)(2)	1,000.
BARNARD COLLEGE 3009 BROADWAY NEW YORK, NY 10027	CENTER FOR TODDLER DEVELOPMENT	170(B)(1) (A)(II)	10,000.
BETH ISRAEL MEDICAL CENTER FIRST AVENUE AT 16TH STREET NEW YORK, NY 10003	DR. DANIEL BUCHBINDER'S OMFS RESIDENCY FUND	170(B)(1) (A)(III)	1,000.
BOARD OF JEWISH EDUCATION 520 8TH AVENUE, 15TH FLOOR NEW YORK, NY 10018	PROJECT SEED	509(A)(1)	10,000.
BREAD FOR THE WORLD INSTITUTE 50 F ST NW, SUITE 500 WASHINGTON, DC 20001	GENERAL	509(A)(1)	10,000.
BROWN UNIVERSITY CONTROLLERS OFFICE, BOX J PROVIDENCE, RI 02912	ANNUAL FUND	170(B)(1) (A)(II)	25,000.
CENTER FOR AMERICAN PROGRESS 1333 H STREET NW 10TH FLOOR WASHINGTON, DC 20005	CAMPUS PROGRESS	170(B)(1) (A)(VI)	25,000.
CHAI LIFELINE 151 W 30TH STREET, 3RD FLOOR NEW YORK, NY 10001	CAMP SIMBACHA	509(A)(1)	10,000.
CITY AT PEACE - NATIONAL 1328 FLORIDA AVENUE NW WASHINGTON, DC 20009	GENERAL	509(A)(2)	1,000.
CLAL 440 PARK AVENUE SOUTH NEW YORK, NY 10016	GENERAL	509(A)(1)	25,000.

COMPOSERS COLLABORATIVE INC. 210 RIVERSIDE DRIVE NEW YORK, NY 10025	GENERAL	509(A)(1)	5,000.
WEIL CORNELL MEDICAL COLLEGE 100 BROADWAY, 8TH FLOOR NEW YORK, NY 10005	DR. DEVEREUX'S AORTIC DISEASE RESEARCH FUND	509(A)(3)	15,000.
THE FOOD ALLERGY INITIATIVE, INC. 1414 AVENUE OF AMERICAS NEW YORK, NY 10019	GENERAL	170(B)(1) (A)(VI)	20,000.
FOUR WAY BOOKS, INC PO BOX 535 VILLAGE STATION NEW YORK, NY 10014	GENERAL	170(B)(1) (A)(VI)	500.
GODDARD RIVERSIDE COMMUNITY CENTER 593 COLUMBUS AVENUE NEW YORK, NY 10024	GENERAL	170(B)(1) (A)(VI)	1,000.
HORACE MANN SCHOOL 231 W 246TH STREET BRONX, NY 10471	ANNUAL FUND	170(B)(1) (A)(III)	50,000.
HORACE MANN SCHOOL 231 W 246TH STREET BRONX, NY 10471	TRUSTEE SCHOLARSHIP FUND	170(B)(1) (A)(III)	50,000.
HORACE MANN SCHOOL 231 W 246TH STREET BRONX, NY 10471	ENDOWMENT FUND	170(B)(1) (A)(III)	150,000.
THE HOSPITAL FOR SPECIAL SURGERY FUND INC 535 EAST 70TH STREET NEW YORK, NY 10021	DR. RICK POSITANO'S SPORTS MEDICINE RESEARCH FUND	170(B)(1) (A)(VI)	5,000.
THE HOSPITAL FOR SPECIAL SURGERY FUND INC 535 EAST 70TH STREET NEW YORK, NY 10021	DR. HOLLIS POTTER'S MRI RESEARCH FUND	170(B)(1) (A)(VI)	5,000.

JENNA'S RAINBOW FOUNDATION, INC 24 W RAILROAD AVENUE TENAFLY, NJ 07670	GENERAL	170(B)(1) (A)(VI)	25,000.
JEWISH COMMUNITY CENTER IN MANHATTAN INC 334 AMSTERDAM AVENUE NEW YORK, NY 10023	GENERAL	509(A)(2)	5,000.
KAUFMAN CENTER 129 WEST 67TH STREET NEW YORK, NY 10023	GENERAL	170(B)(1) (A)(II)	10,000.
KAUFMAN CENTER 129 WEST 67TH STREET NEW YORK, NY 10023	20TH REUNION OF SUMMER MUSICAL THEATER WORKSHOP	170(B)(1) (A)(II)	5,000.
NEW YORK UNIVERSITY SCHOOL OF MEDICINE FOUNDATION INC 1 PARK AVENUE, 11TH FLOOR NEW YORK, NY 10016	DR. BOSNIAK'S RADIOLOGY RESEARCH FUND	509(A)(3)	10,000.
LONG ISLAND JEWISH MEDICAL CENTER 972 BRUSH HOLLOW ROAD, 5TH FLOOR WESTBURY, NY 11590	DR. ALLAN ABRAMSON'S RESEARCH FUND - OTOLARYNGOLOGY	170(B)(1) (A)(III)	1,000.
MANHATTAN JEWISH EXPERIENCE SYNAGOGUE 131 W 86TH ST NEW YORK, NY 10024	GENERAL		100,000.
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	THE RENAL CARCINOMA PROGRAM FUND	170(B)(1) (A)(III)	25,000.
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	THE RHABDOMYOSARCOMA FUND	170(B)(1) (A)(III)	10,000.
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	DR. SCHWARTZ'S COMPUTATIONAL IMAGE ANALYSIS LAB	170(B)(1) (A)(III)	15,000.

MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	DR. STEPHEN NIMER'S RESEARCH	170(B)(1) (A)(III)	25,000.
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	DR. LEONARD WEXLER'S RHABDOMYOSARCOMA FUND	170(B)(1) (A)(III)	10,000.
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	DR. PANICEK'S SPECIAL IMAGING AND EDUCATION FUND	170(B)(1) (A)(III)	10,000.
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	DR. PAUL RUSSO'S RENAL CARCINOMA PROGRAM FUND	170(B)(1) (A)(III)	25,000.
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	DR. KLAUS BUSAM'S SKIN CANCER RESEARCH FUND	170(B)(1) (A)(III)	5,000.
MOEBIUS SYNDROME FOUNDATION PO BOX 147 PILOT GROVE, MO 65276	GENERAL	509(A)(2)	100,000.
NEW YORK PRESBYTERIAN HOSPITAL 525 E L68TH STREET, BOX 156 NEW YORK, NY 10021	MORGAN STANLEY CHILDREN'S HOSPITAL - DR. GERSONY'S BABIES HEART FUND	170(B)(1) (A)(III)	2,000.
THE MOUNT SINAI HOSPITAL ONE GUSTAVE L LEVY PLACE NEW YORK, NY 10029	DR. STEVEN PODOS' GLAUCOMA RESEARCH FUND	170(B)(1) (A)(III)	45,000.
NATIONAL PROSTATE CANCER COALITION FUND 1154 15TH STREET NW WASHINGTON, DC 20005	ZERO - THE PROJECT TO END PROSTATE CANCER	509(A)(1)	10,000.
NATIONAL RESEARCH FUND FOR TICK-BORNE DISEASES, INC PO BOX 643 WILTON, CT 06897	GENERAL	509(A)(2)	1,000.

NEW ALTERNATIVES FOR CHILDREN 37 W 26TH STREET NEW YORK, NY 10010	GENERAL	509(A)(1)	500.
NEW OLD TIME CHAUTAUQUA PO BOX 334 PORT TOWNSEND, WA 98368	GENERAL	170(B)(1) (A)(VI)	500.
NEW YORK EYE AND EAR INFIRMARY 310 E 14TH STREET NEW YORK, NY 10003	DR. LISABETH HALL'S PEDIATRIC FUND	170(B)(1) (A)(III)	10,000.
NEW YORK FOUNDATION FOR THE ARTS 20 JAY STREET, SUITE 740 BROOKLYN, NY 11201	GENERAL	170(B)(1) (A)(VI)	500.
NEW YORK PRESBYTERIAN HOSPITAL 525 E L68TH STREET, BOX 156 NEW YORK, NY 10021	DIVISION OF CARDIOLOGY	170(B)(1) (A)(III)	20,000.
NEW YORK PRESBYTERIAN HOSPITAL 525 E L68TH STREET, BOX 156 NEW YORK, NY 10021	DR. WEINSAFT'S CARDIAC MRI RESEARCH PROGRAM	170(B)(1) (A)(III)	15,000.
NEW YORK UNIVERSITY SCHOOL OF MEDICINE FOUNDATION INC 1 PARK AVENUE, 11TH FLOOR NEW YORK, NY 10016	DR. VICTOR NITTI'S FEMALE UROLOGY FELLOWSHIP FUND	509(A)(3)	5,000.
NEW YORK UNIVERSITY SCHOOL OF MEDICINE FOUNDATION INC 1 PARK AVENUE, 11TH FLOOR NEW YORK, NY 10016	DR. MORTON BOSNIAK'S RADIOLOGY RESEARCH FUND	509(A)(3)	10,000.
PROSTATE CANCER FOUNDATION 1250 4TH STREET SANTA MONICA, CA 90401	GENERAL	509(A)(1)	333,333.
REGENTS OF THE UNIVERSITY OF CALIFORNIA 10920 WILSHIRE BLVD, SUITE 620 LOS ANGELES, CA 90024	UCLA CENTER FOR HUMAN NUTRITION		5,000.

REGENTS OF THE UNIVERSITY OF CALIFORNIA 10920 WILSHIRE BLVD, SUITE 620 LOS ANGELES, CA 90024	DR. ARTHUR ROSENBAUM'S RESEARCH FUND	50,000.
SHELBOURNE FARMS 1611 HARBOR ROAD    SHELBOURNE, VT 05482	GENERAL	509(A)(2)    1,000.
SINGLE STOP USA, INC 1825 PARK AVENUE, #503    NEW YORK, NY 10035	GENERAL	170(B)(1) (A)(VI)    25,000.
STANFORD UNIVERSITY 3145 PORTER DRIVE    PALO ALTO, CA 94304	GENERAL	170(B)(1) (A)(II)    75,000.
STEPHEN WISE FREE SYNAGOGUE 30 W 68TH STREET, ROOM 401    NEW YORK, NY 10023	CENTER FOR VALUES AND ETHICS	170(B)(1) (A)(I)    50,000.
STEPHEN WISE FREE SYNAGOGUE 30 W 68TH STREET, ROOM 401    NEW YORK, NY 10023	GENERAL	170(B)(1) (A)(I)    50,000.
STEPHEN WISE FREE SYNAGOGUE 30 W 68TH STREET, ROOM 401    NEW YORK, NY 10023	NEXT STEP MEN'S SHELTER	170(B)(1) (A)(I)    2,000.
STEPHEN WISE FREE SYNAGOGUE 30 W 68TH STREET, ROOM 401    NEW YORK, NY 10023	RELIGION SCHOOL FUND	170(B)(1) (A)(I)    10,000.
STUDENT ADVOCACY, INC 3 WEST MAIN STREET    ELMSFORD, NY 10523	GENERAL	170(B)(1) (A)(VI)    20,000.
TEACHERS COLLEGE COLUMBIA UNIVERSITY 309 MAIN HALL, 525 W 120TH STREET, BOX 30    NEW YORK, NY	HOLLINGWORTH PRESCHOOL	170(B)(1) (A)(II)    10,000.

THE 52ND STREET PROJECT, INC 789 10TH AVENUE NEW YORK, NY 10019	GENERAL	509(A)(2)	500.
CHILDREN'S VILLAGE INC ECHO HILLS DOBBS FERRY, NY 10522	GENERAL	170(B)(1) (A)(VI)	1,000.
JOINT PASSOVER ASSOCIATION OF THE CITY OF NEW YORK 32 BROADWAY NEW YORK, NY 10004	GENERAL	170(B)(1) (A)(VI)	1,800.
THE MOVING IMAGE, INC 209 WEST HOUSTON STREET NEW YORK, NY 10014	SUPERHEROES	170(B)(1) (A)(VI)	50,000.
TRUSTEES OF COLUMBIA UNIVERSITY 615 WEST 131ST STREET, 4TH FLOOR M NEW YORK, NY 10027	DR. JUDITH CORNER'S RESEARCH	170(B)(1) (A)(II)	10,000.
TRUSTEES OF COLUMBIA UNIVERSITY 615 WEST 131ST STREET, 4TH FLOOR M NEW YORK, NY 10027	C2B2	170(B)(1) (A)(II)	150,000.
TRUSTEES OF COLUMBIA UNIVERSITY 615 WEST 131ST STREET, 4TH FLOOR M NEW YORK, NY 10027	MASTERS OF SCIENCE FINANCIAL ENGINEERING	170(B)(1) (A)(II)	5,000.
TRUSTEES OF COLUMBIA UNIVERSITY 615 WEST 131ST STREET, 4TH FLOOR M NEW YORK, NY 10027	DR. ROBIN GOLAND'S RESEARCH FUND	170(B)(1) (A)(II)	2,500.
TRUSTEES OF COLUMBIA UNIVERSITY 615 WEST 131ST STREET, 4TH FLOOR M NEW YORK, NY 10027	DR. SCHWARTZ'S COMPUTATIONAL IMAGE ANALYSIS LAB	170(B)(1) (A)(II)	15,000.
TRUSTEES OF COLUMBIA UNIVERSITY 615 WEST 131ST STREET, 4TH FLOOR M NEW YORK, NY 10027	DR. JUDITH CORNER'S RESEARCH	170(B)(1) (A)(II)	15,000.

UC SAN DIEGO FOUNDATION 9500 GILMAN LA JOLLA, CA 92093	JACOBS SCHOOL OF ENGINEERING	509(A)(1)	10,000.
UC SAN DIEGO FOUNDATION 9500 GILMAN LA JOLLA, CA 92093	DIVISION OF PHYSICAL SCIENCES	509(A)(1)	10,000.
UNIVERSITY OF CALIFORNIA SAN FRANCISCO FOUNDATION 220 MONTGOMERY STREET, 5TH FLOOR SAN FRANCISCO, CA 94104	GENERAL	170(B)(1) (A)(IV)	100,000.
UNIVERSITY OF CALIFORNIA SAN FRANCISCO FOUNDATION 220 MONTGOMERY STREET, 5TH FLOOR SAN FRANCISCO, CA 94104	DR. DAVID JABLONS' RESEARCH FUND	170(B)(1) (A)(IV)	10,000.
UNION SETTLEMENT ASSOCIATION, INC 237 EAST 104TH STREET NEW YORK, NY 10029	GENERAL	170(B)(1) (A)(VI)	2,500.
UNIVERSITY OF TEXAS M.D. ANDERSON CANCER CENTER PO BOX 4486 HOUSTON, TX 77210	DR. LOGOTHETIS' RESEARCH		10,000.
UNIVERSITY OF TEXAS M.D. ANDERSON CANCER CENTER PO BOX 4486 HOUSTON, TX 77210	DR. LOGOTHETIS' RESEARCH		10,000.
URBAN PATHWAYS, INC 575 EIGHT AVENUE, 9TH FLOOR NEW YORK, NY 10018	GENERAL	170(B)(1) (A)(VI)	5,000.
USC SHOAH FOUNDATION INSTITUTE 650 W 35TH ST, #114 LOS ANGELES, CA 90089	GENERAL	170(B)(1) (A)(II)	5,000.
VERMONT LAW SCHOOL PO BOX 96 S ROYALTON, VT 05068	GENERAL	170(B)(1) (A)(II)	100,000.

THE SHAW FAMILY ENDOWMENT FUND C/O SCOTT

26-0476590

VOLUNTEER HEALTH PROGRAM, LTD.  
16 HAINES BLVD PORT CHESTER, NY MEDICAL TEAM  
10573

509(A)(2) 10,000.

WEIL CORNELL MEDICAL COLLEGE  
100 BROADWAY, 8TH FLOOR NEW  
YORK, NY 10005

DR. MARTIN PRINCE'S  
RESEARCH FUND

509(A)(3) 15,000.

WEIL CORNELL MEDICAL COLLEGE  
100 BROADWAY, 8TH FLOOR NEW  
YORK, NY 10005

DR. DEVEREUX'S AORTIC  
DISEASE RESEARCH FUND

509(A)(3) 40,000.

WEIL CORNELL MEDICAL COLLEGE  
100 BROADWAY, 8TH FLOOR NEW  
YORK, NY 10005

DR. LEONARD GIRARDI'S  
MARFAN RESEARCH FUND

509(A)(3) 10,000.

WILLIAM J. CLINTON FOUNDATION  
1200 PRESIDENT CLINTON AVENUE  
LITTLE ROCK, AR 72201

GENERAL

170(B)(1)  
(A)(VI) 50,000.

UNIVERSITY OF PITTSBURGH  
PHYSICIANS  
200 LOTHROP STREET PITTSBURGH,  
PA 15213

WISER

170(B)(1)  
(A)(III) 25,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

2,419,633.

Application for Extension of Time To File an  
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box ►
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ► *All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns*

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization <b>THE SHAW FAMILY ENDOWMENT FUND</b> <b>C/O SCOTT BARLEY</b>	Employer identification number <b>26-0476590</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions <b>120 WEST 45TH STREET, 39TH FLOOR</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>NEW YORK, NY 10036</b>	

Check type of return to be filed (file a separate application for each return).

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

**SCOTT BARLEY**

- The books are in the care of ► **120 WEST 45TH STREET, 39TH FLOOR - NEW YORK, NY 10036**  
Telephone No ► **(212) 478-0726** FAX No ► \_\_\_\_\_ ►
- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ►  . If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

►  calendar year **2009** or►  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	<b>2,408.</b>
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	<b>2,408.</b>
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	\$	<b>0.</b>

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

<b>Part II Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed)		
<b>Type or print</b> File by the extended due date for filing the return. See instructions	Name of Exempt Organization <b>THE SHAW FAMILY ENDOWMENT FUND C/O SCOTT BARLEY</b>	Employer identification number <b>26-0476590</b>
	Number, street, and room or suite no. If a P.O. box, see instructions <b>120 WEST 45TH STREET, 39TH FLOOR</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>NEW YORK, NY 10036</b>	

**Check type of return to be filed** (File a separate application for each return):

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**SCOTT BARLEY**

- The books are in the care of ► **120 WEST 45TH STREET, 39TH FLOOR – NEW YORK, NY 10036**
- Telephone No. ► **(212) 478-0726** FAX No ► \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ►  . If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension is for.
- 4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**
- 5 For calendar year **2009**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_
- 6 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- 7 State in detail why you need the extension \_\_\_\_\_

**ADDITIONAL INFORMATION IS NEEDED TO FILE A COMPLETE AND ACCURATE RETURN**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$ <b>2,408.</b>
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$ <b>2,408.</b>
c <b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ <b>0.</b>

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ► William Sheehan Title ► PREPARER

Date ► **8/9/10**

Form 8868 (Rev. 4-2009)

**TAXPAYER COPY**